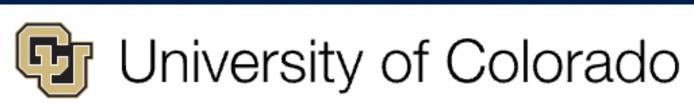
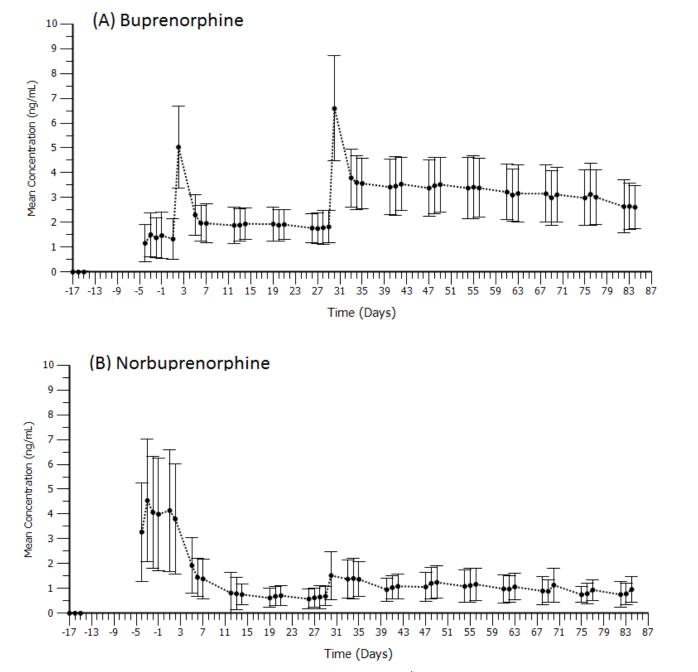
Immediate Fentanyl to Extended-Release Buprenorphine Transition in Two Adolescents with OUD



BACKGROUND

- Adolescent overdose deaths with fentanyl involvement increased 4-fold from 2019 to 2021 (253 to 884 deaths)
- Buprenorphine (BUP) is recommended for adolescents with OUD
- Barriers to SL-BUP initiation include: (1) medication nonadherence & (2) concern for precipitated withdrawal
- XR-BUP could be a solution; however, BUP initiation is challenging due to medication nonadherence and requirement for SL-BUP stabilization prior to XR-BUP injection
- Hypothesis: A rapid rise in serum BUP concentrations with XR-BUP might mimic those seen in high-dose **BUP** inductions

eFigure 1: Plasma Buprenorphine and Norbuprenorphine Concentrations Following XR-BUP Injection



eFigure 1. (A) Mean \pm SD buprenorphine plasma concentrations; (B) Mean \pm SD norbuprenorphine plasma concentrations (before and 24 hr after sustained-release buprenorphine on Day 1, immediately before hydromorphone administration on Days -17, -16, -15, -3, -2, -1, 5–7, etc) (ITT population). ITT, intent-to-treat; SD, standard deviation.

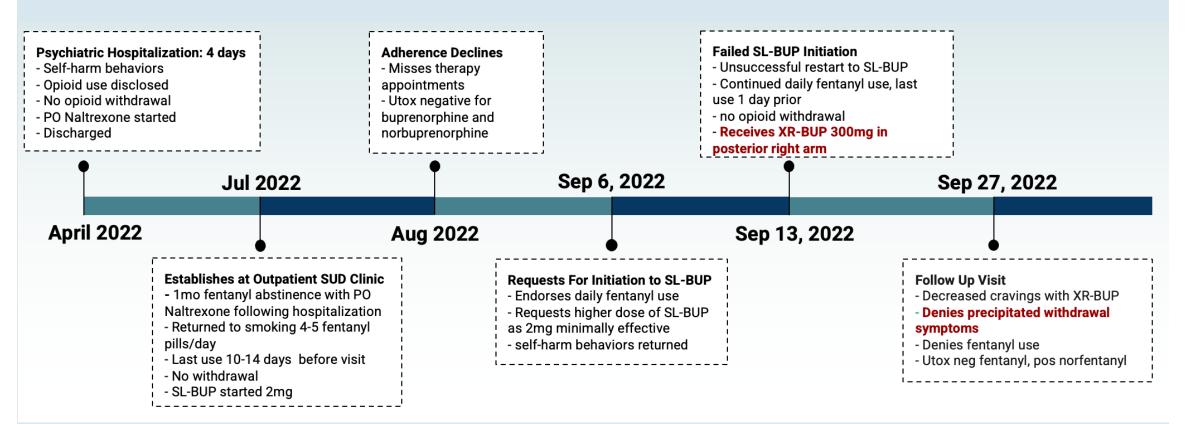
CASE REPORTS

Case 1: 15-year-old Latino male

PMH: Severe opioid use disorder, adjustment disorder, selfharm behaviors, moderate cannabis use disorder

Current Opioid Use: Smoking 4-5 illicit fentanyl pills/day

Treatment Hx: PO Naltrexone, SL-BUP

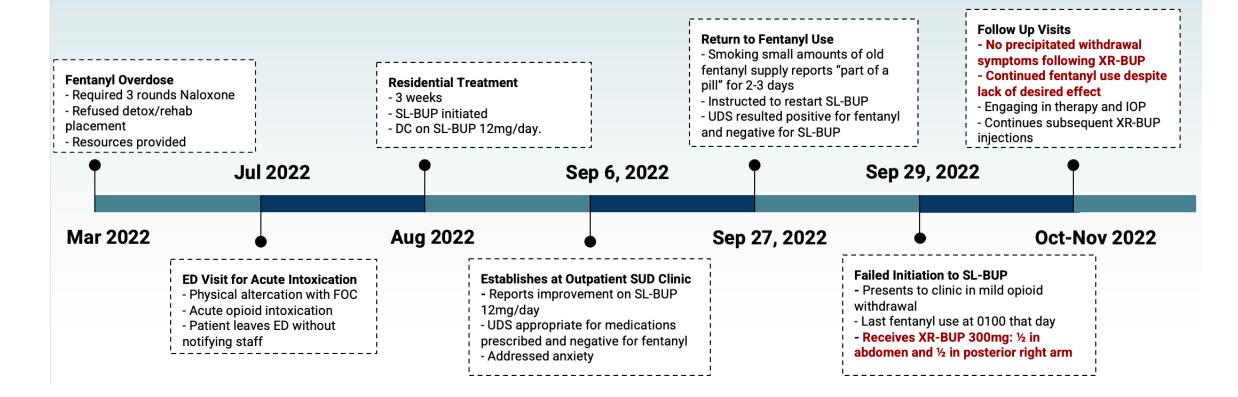


Case 2: 16-year-old Latino male

PMH: Severe opioid use disorder, hx of opioid overdose, unspecified mood disorder, suicidal ideations, moderate cannabis use disorder

Current Opioid Use: Smoking 20 illicit fentanyl pills/day

Treatment Hx: Detox, residential, SL-BUP



DISCUSSION

- There is limited literature that demonstrates the safety of XR-BUP in adolescent patients
- No literature available regarding the direct transition from daily illicit fentanyl use to XR-BUP without a period of SL-BUP stabilization in adolescents
- These case studies demonstrate success with the utilization of XR-BUP in adolescents and propose an alternative BUP initiation process when patients use fentanyl

CONCLUSION

• There is an urgent need for further investigation into expedited BUP initiation protocols that utilize XR-BUP, especially in adolescent patients where SL-BUP medication nonadherence remains a persistent barrier to sustained recovery

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